

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Sm	11	6/29/00
O.I.P.E. CLASSIFIER	EWA	549	7/5/00
FORMALITY REVIEW	MA		8-10-00
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected  
 " ..... Allowed  
 (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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JC490 U.S. PTO  
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APPL  
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TITLE APPLICANTS

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Form PTO-436A  
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